

# **MEMBER WEBINAR:**

## **Eligibility and Application for Assisted Living Distribution from the CARES Act Provider Relief Fund**

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# Agenda

- Basics of the CARES Act Provider Relief Fund
- Where you may be now in the process
- What you need to do to apply for funds
- Tools and Resources
- Audience Q&A

# About Us:



**Thomas R. Barker**  
**Partner**  
**Foley Hoag LLP**



**Bryan W. Starnes**  
**Chief Financial Officer**  
**ALG Senior**



**Moderator:**  
**Maribeth Bersani**  
**Chief Operating Officer**  
**Argentum**

# **Basics of the CARES Act Provider Relief Fund (PRF)**

# What is the PRF Fund?

The \$175 billion Provider Relief Fund (PRF) established by the Coronavirus Aid, Relief, and Economic Security (CARES) Act and the Paycheck Protection Program and Health Care Enhancement Act:

- must be used to prevent, prepare for, and respond to coronavirus
- does not have to be paid back (provided all requirements are met)
- is limited to U.S. providers
- is taxable for for-profit organizations (i.e. non-501(c)(3) providers)

HHS has only distributed about \$110 billion of the \$175 billion appropriated by Congress.

# PRF Fund Distributions to Date

- General Relief Fund
  - Phase 1: \$30B distribution to Medicare providers based on Medicare revenues; \$20B additional to ensure that Medicare providers receive 2% of gross revenue
  - Phase 2: \$18B to date for Medicaid/CHIP providers ineligible in Phase 1, Medicaid managed care plans, dentists, and assisted living; those who missed submitting in Phase 1
- Targeted Distributions
  - Rural
  - Skilled Nursing Facilities
  - High-Impact
  - Safety Net hospital
  - Medicaid
  - Dentists
  - Indian health
  - Uninsured

# What are the Terms/Conditions?

The funds require providers to attest to certain Terms and Conditions (T&Cs) that, among other things:

- Requires that recipient provided care to COVID patients after January 31, 2020
  - HHS views every patient as a potential COVID patient
- Imposes recordkeeping requirements
- Requires quarterly reporting to oversight entities
- Limits executive compensation with PRF funds to limits in the federal pay scale
- Providers that accept the funds are deemed to have accepted the T&Cs

# FAQs

- HHS has issued a series of FAQs that address routine issues from the fund. The agency updates the FAQs every couple of days and they can be found [here](#).
- Argentum has prepared FAQs featuring questions related to the Trade Association Portal, terminologies, licensures, change of ownership information, and previous payments received from the fund. These FAQs can be found [here](#).



# Eligibility and application deadline for Assisted Living allocation

- **Eligibility:** Approved assisted living providers who filed federal income tax returns for fiscal years 2017, 2018, 2019 (or were exempt from filing); AND did not permanently cease providing patient care directly or indirectly are qualified to apply.
- Applicants that were eligible for Phase 1 General Distribution payments are also eligible for Phase 2 General Distribution payments **only if the applicants have not yet received payment that equals approximately 2% of revenue from patient care.**
- Read full [Eligibility FAQs](#) last updated 9/2.
- **Application deadline:** submit via the [Enhanced Provider Relief Fund Payment Portal](#) by September 13, 2020

# Distribution methodology for Assisted Living Allocation

## Distribution Methodology:

Payment Allocation per Provider = 2% (**Gross Revenues** x Percent of Gross Revenues from Patient Care)\*

\*For CY 2017 or 2018 or 2019 as selected by applicant

**\*'Patient care'** means health care, services and supports, as provided in a medical setting, at home, or in the community to individuals who may currently have or be at risk for COVID-19, whereby HHS broadly views every patient as a possible case of COVID-19. Assisted living facilities that are applying for Phase 2 – General Distribution funds may include patient care revenue that supports residents' nutritional, housing, activities of daily living, and medical needs, including purchased services.

**Where do you fall in the process?**

# Where do you fall in the process?

- You provided your TIN numbers to the Association portal last month but haven't started the HHS application
- You did not provide your TIN numbers to the Association portal last month and have not started the HHS application
- You've decided the Fund doesn't apply to your organization
- You've begun the application but have hit a stumbling block in the process

**What you need to do to apply**

# You provided your TIN numbers to Association Portal but have not started HHS application

- HHS has already validated your TIN numbers and this will expedite your application process

# You provided your TIN numbers to Association Portal but have not started HHS application

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## TIN Under Review for CARES Provider Relief Fund Payment

1 message

NO-REPLY-LINKHHS <noreply.trackit@uhc.com>  
To: bhanteenman@gmail.com

Thu, Sep 3, 2020 at 6:44 PM

SUTTON GARDENS LLC  
TIN (Last 3 digits): 477

Dear Valued Provider:

Thank you for submitting your Taxpayer Identification Number (TIN) information to the Enhanced Provider Relief Fund Payment Portal for consideration to receive payment from the Provider Relief Fund. **Your information is currently being reviewed by the Department of Health and Human Services to determine if your organization is eligible to receive funds.**

What action should I take?

No action is currently required. You will be notified of the decision within 15 business days. If approved, you will be given instructions to return to the Enhanced Provider Relief Fund Payment Portal to upload financial information.

Where can I find more information?

Please visit [hhs.gov/providerrelief](https://www.hhs.gov/providerrelief) for Terms and Conditions and Frequently Asked Questions (FAQs). For additional information, please call the provider support line at (866) 569-3522; for TTY dial 711. Hours of operation are 7 a.m. to 10 p.m. Central Time, Monday through Friday. Service staff members are available to provide real-time technical assistance, as well as service and payment support.

Thank you for all you are doing to support and protect the American people during this difficult time.

Thomas J. Engels  
Administrator  
Health Resources and Services Administration  
United States Department of Health and Human Services

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Program eligibility and allocation of funds is determined by HHS, subject to adjustment (as may be necessary) and available funding; see details at <https://www.hhs.gov/coronavirus/cares-act-provider-relief-fund/index.html>. Terms and conditions will apply. This email was sent by United HealthCare Services, 9700 Health Care Lane, Minnetonka, MN 55343 USA on behalf of the U.S. Department of Health & Human Services, 200 Independence Ave SW Washington DC 20201.

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# What to do NOW if you haven't:

- STEP 1: Establish your Optum ID via the [Attestation Portal](#).
- STEP 2: Enter your Organizational TINs for validation. (You must have entered your TINs into the Portal by 11:59 PM ET on September 13 for your application to be considered, regardless of when the TINs are validated.)
- STEP 3: Print and [read the instructions](#) from the website. [Download the application](#) for reference.
- STEP 4: Gather all materials you will need.
- STEP 5: Submit your application [via the Portal](#). Note: Application Type is “RF.”



# Setting up your Optum ID

- Go to your landing page: <https://cares.linkhealth.com/#/>
- Click “apply for funds”.
- Then choose “Set Up Optum ID” button. That is PERSON SPECIFIC. Set one ID up and submit your applications. The system is not based on one Optum ID per facility or TIN.

NOTE: the number of entities that can be included in one application is unlimited. However, the **number of applications** that can be submitted UNDER THE SAME OPTUM ID is **20**.

- After you submit, you will get a confirm email, temp ID, etc... and then once you validate, you can enter organizational TINs for Validation.
- Currently the site is indicating a 15-day wait for Validation to be verified.

# Materials you will need:

- Organizational TIN tax return (FORM 1120, 1120S, or 1065) for either 2019, 2018, or 2017 (pdf format)
  - HINT: Select the highest-revenue year
- Quarterly Federal tax return (FORM 941 for Q1 2020) or Federal Unemployment Tax Return (FORM 940) unless exempt
- Revenue Worksheet (if required by Field 15 of the application)
- For ALL facilities covered by tax return selected:
  - Total # of facilities consolidated under the Organizational TIN
  - Total # beds covered by the license of the facilities under the Organizational TIN
  - FTEs and a completed [FTE Worksheet](#)
    - HINT: Take total hours paid for a month or quarter and divide by 30
  - % source of revenue for tax return selected
  - Entity names, TIN #s and NPI numbers

# Regarding revenues/expenses:

- For all non-AL revenues included in gross revenues, you need to calculate the percentage and complete a [Gross Revenue Worksheet](#).
- Enter the percentage of the applicant's revenues entered in Field 10 that represents amounts received for patient care rendered for the same fiscal year selected in Field 11. This percentage includes pharmacy revenue derived through the 340B program.
- This percentage should exclude non-patient care revenue such as the following:
  - Insurance, retail, or real estate revenues (exception for skilled nursing and assisted living facilities' real estate revenue where resident fees are allowable)
  - Grants or tuition



Reference ID \_\_\_\_\_

## CARES Act Provider Relief Fund

Tax ID Number: \_\_\_\_\_

Name as shown on your  
income tax return: \_\_\_\_\_

Federal Tax Classification: \_\_\_\_\_

Business Name (if different): \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Registration Type: \_\_\_\_\_

Group NPI (Group Only): \_\_\_\_\_



(1) Contact Person Name: \_\_\_\_\_

(2) Contact Person Title: \_\_\_\_\_

(3) Contact Person Phone  
Number: \_\_\_\_\_

(4) Contact Person Email: \_\_\_\_\_

(5) Applicant Type: \_\_\_\_\_

*Fields 6 - 8 have been intentionally removed*

(9) CMS Certification  
Number (CCN), if applicable: \_\_\_\_\_

**REVENUES**

(10) Revenues: \$ \_\_\_\_\_

(11) Fiscal Year of Revenues: \_\_\_\_\_

(12) Percentage of Revenue from Patient Care: \_\_\_\_\_ %

*Fields 13 and 14 have been intentionally removed*

(15) Upload Revenues  
Worksheet (if required): \_\_\_\_\_

(16) Upload  
Federal Tax Form: \_\_\_\_\_

*Fields 17 - 32 have been intentionally removed*

**BANKING INFORMATION**

(33) Bank Name: \_\_\_\_\_

(34) ABA Routing  
Number: \_\_\_\_\_

(35) Account Holder Name: \_\_\_\_\_

(36) Account Number: \_\_\_\_\_



# Payment and post-payment process

- All fund distributions will be paid to the Filing or Organizational TIN, not directly to subsidiary TINs.
- Providers must attest to payment within 90 days of receipt via the Application and Attestation Portal.
- HHS will require recipients to submit reports related to their use of PRF payments

# Tools and Resources

- [ASHA's Advocacy Resources](#)
- [ASHA's COVID-19 Resources](#)
- [Argentum's Advocacy Resources](#)
- [Argentum's Coronavirus Toolkit](#)
- [Argentum FAQs for Phase 2 Distribution for Assisted Living](#)
- [HHS Instructions for Phase 2 Provider Relief Fund](#)
- [Provider Relief Fund Application](#) form
- [Provider Relief Fund Payment Attestation Portal](#)



# Audience Q&A

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**Moderator:**  
**Maribeth Bersani**  
**Chief Operating Officer**  
**Argentum**

Didn't get your question answered or prefer to send later?

Email us at [HHSproviderfund@argentum.org](mailto:HHSproviderfund@argentum.org). If we are unable to answer your question(s), we will share with HHS for consideration for their [FAQs](#).

# Register for our next COVID-19 Members-Only Webinar:

## **Understanding the PREP Act and its Potential Application for Senior Living**

Tuesday, September 15, 2020

1:00 -2:00 PM ET

Register via:

<https://www.argentum.org/covid19webinars/>

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